


07/29/03

15915 U.S. PTO

Please type a plus sign (+) inside this box 

PTO/SB/05 (12/97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

21905 U.S. PTO

10/628562

07/29/03

Utility Patent Application Transmittal <small>(only for nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	SUND 114 CIP	DATE	July 29, 2003
	Inventor (s): Bi-Yun YEH et al.			

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231																
<p>1. <input checked="" type="checkbox"/> Fee Determination Record (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 14] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 4]</p> <p>4. Oath or Declaration [Total Sheets]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR .63(d) (for continuation/divisional with Box 17 completed)</p> <p>[Note Box 5 below]</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p>ACCOMPANYING APPLICATION PARTS</p> <p>8. <input checked="" type="checkbox"/> Assignment Papers (previously filed cover sheet & document(s)) (6 pages)</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired</p> <p>15. <input checked="" type="checkbox"/> Copy of Certified Copy first page of Priority Document (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other: _____</p>																
<p>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/481,714</p>																	
<p>18. CORRESPONDENCE ADDRESS</p> <p><input checked="" type="checkbox"/> Customer Number or Bar Code Label 23995 (Insert Customer No. or Attach bar code label here) or <input type="checkbox"/> Correspondence address below</p> <table border="1"><tr><td>NAME</td><td colspan="3">Phillip G. Avruch (Reg. No. 46,076) - Rabin & Berdo, P.C.</td></tr><tr><td>ADDRESS</td><td colspan="3"></td></tr><tr><td>CITY</td><td>STATE</td><td>ZIPCODE</td><td></td></tr><tr><td>COUNTRY</td><td>TELEPHONE</td><td>FAX</td><td></td></tr></table>		NAME	Phillip G. Avruch (Reg. No. 46,076) - Rabin & Berdo, P.C.			ADDRESS				CITY	STATE	ZIPCODE		COUNTRY	TELEPHONE	FAX	
NAME	Phillip G. Avruch (Reg. No. 46,076) - Rabin & Berdo, P.C.																
ADDRESS																	
CITY	STATE	ZIPCODE															
COUNTRY	TELEPHONE	FAX															

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.